

## Emergency Planning Self-Assessment

Question	Yes	No
Have you identified the hazards within the area and neighboring areas which could impact the local area or community?	<input type="checkbox"/>	<input type="checkbox"/>
Have you reviewed your community's emergency management plan within the past 12 months and know how your emergency plan ties into it?	<input type="checkbox"/>	<input type="checkbox"/>
Do you know what staffing, equipment, forms, and supplies are needed to perform high-priority tasks?	<input type="checkbox"/>	<input type="checkbox"/>
Do you know the critical equipment, forms, or supplies that would need to be replaced in an emergency situation?	<input type="checkbox"/>	<input type="checkbox"/>
Do you know what other entities would be affected by an interruption of services in your organization?	<input type="checkbox"/>	<input type="checkbox"/>
Do you know how your special needs population would be impacted by an interruption in your organization?	<input type="checkbox"/>	<input type="checkbox"/>
Do you know what outside services/vendors are relied upon for normal operation?	<input type="checkbox"/>	<input type="checkbox"/>
Do you know your current backup procedures?	<input type="checkbox"/>	<input type="checkbox"/>
Do you know if any critical backups are stored offsite?	<input type="checkbox"/>	<input type="checkbox"/>
Do you know the temporary operating procedures in case of an emergency? (E.g., If you use interpreter services do you have an agreement with another firm for emergencies?)	<input type="checkbox"/>	<input type="checkbox"/>
Do you know the high-priority tasks and procedures in your organization?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a contingency plan?	<input type="checkbox"/>	<input type="checkbox"/>
Do you know who is responsible for maintaining the organization's contingency plan?	<input type="checkbox"/>	<input type="checkbox"/>
Do you know the lines of succession in your organization?	<input type="checkbox"/>	<input type="checkbox"/>
Do you have a clear understanding of your authority and responsibility in your organization's emergency operations plan?	<input type="checkbox"/>	<input type="checkbox"/>